

DBP Bromate Reporting Form
Quarterly Reporting Form for Running Annual Average (RAA)
for Public Water Systems Using Ozone

PWSID #: _____ SYSTEM NAME: _____
TREATMENT PLANT NAME: _____ PLANT ID #: _____
DATE: _____ PREPARED BY: _____
AUTHORIZED SIGNATURE: _____ TITLE: _____
Total # of samples taken: Month 1: _____ Month 2: _____ Month 3: _____
Violation?: _____
Check One: 1st Quarter 2nd Quarter 3rd Quarter 4th Quarter
(Due by April 10th) (Due by July 10th) (Due by Oct. 10th) (Due by Jan. 10th)

	Column A	Column B	Column C	Column D
Month	Year	Monthly Data (mg/L) Bromate Concentration	Quarterly Average (mg/L)	Running Annual Average (RAA) (mg/L)
January	20__ __			
February	20__ __			
March	20__ __			
April	20__ __			
May	20__ __			
June	20__ __			
July	20__ __			
August	20__ __			
September	20__ __			
October	20__ __			
November	20__ __			
December	20__ __			
			Running Annual Average (RAA)=	

Attach Laboratory Reporting Forms for each monitoring period.
For months when ozone is not used, enter "NR" in Column B.
For lab reporting of "Non-Detect", enter "0" in Column B